

UNITED STATES v. Kevin Lawrence, et al., CR02-260PAUSAs: Todd Brilliant, Jeffrey B. Coopersmith., & Ye-Ting Woo

NAME: _____
() Check if reporting correction to name and/or address on last page

INDIVIDUAL VICTIM IMPACT STATEMENT

How have you and/or members of your family been affected by this crime?

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

(Please continue this statement on an additional sheet of paper if you wish.)

Do you relate to people differently since the crime? Please explain. _____

How has the crime affected your and/or your family's lifestyle? Please explain.

Has the crime affected your and/or your family's livelihood? Please explain.

Have you experienced any of the following reactions to the crime?

PLEASE REALIZE THESE ARE NORMAL REACTIONS TO A TRAUMATIC EVENT OR SITUATION.

☐ Anger ☐ Anxiety ☐ Fear ☐ Grief ☐ Guilt ☐ Numb ☐ Chronic Fatigue
☐ Sleep Loss ☐ Nightmares ☐ Appetite Change ☐ Unsafe ☐ Uncontrolled Crying
☐ Trouble Concentrating ☐ Repeated Memory of Crime ☐ Depression

Please describe any other reactions to the crime committed.

What else would you like the Judge to know about the defendant, or your situation as a result of the crime?

Please list your **actual** financial losses from this crime. Please attach copies of receipts or other records whenever possible. If you have already provided documentation to an investigative agency, please indicate agent name and agency, if known.

In determining your actual losses, use only the principle amount of your investment. Do not include any interest promised to you. If you have received any payments or return of funds from the defendants, deduct this amount from the principle amount you invested, regardless of whether the payments were characterized as earnings or return of principle. In other words, list the total amount you invested (line #1), then subtract the total amount returned to you in the forms of interest and/or principle (line #2). The net of these two amounts is your total actual loss amount (line #3) for the purpose of ordering restitution in this case.

1. Total Amount Invested..... \$ _____

2. Total Amount Returned..... - \$ _____

3. Total Actual Losses..... = \$ _____

OTHER EXPENSES INCURRED:

You may have incurred other expenses as a result of this crime, such as legal fees, financial penalties, or tax liabilities. While the court may not be able or choose to order restitution for these types of losses, such losses and their impact on victims may be of interest to the court in determining the final sentence imposed on the defendant. **Please list below any additional expenses incurred as a result of this crime:**

1. Legal Fees..... \$ _____

2. Financial Penalties.....+ \$ _____

3. Taxes/tax penalties.....+ \$ _____

4. Other expenses.....+ \$ _____

Total Other Expenses Incurred..... = \$ _____

I declare the preceding verification contained in this form is true and correct to the best of my knowledge, under penalty of law.

Signature: _____

Printed Name: _____

Address to which restitution should be sent: _____

Date: _____

Please return the completed form to: Victim-Witness Coordinator, United States Attorney's Office, 601 Union Street, Suite 5100, Seattle, WA 98101-3902 or fax a copy to (206) 553-0990.